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| UTILITY            |
|--------------------|
| PATENT APPLICATION |
| TRANSMITTAL        |

Attorney Docket No. 14001

| TRANSMITTAL                                                     | LIQUID LI<br>Title SEALING C | PSTICI<br>AP | K DEVICE  | HAVIN |
|-----------------------------------------------------------------|------------------------------|--------------|-----------|-------|
| (Only for new nonprovisional applications under 37 CFR 1.53(b)) | Express Mail Label N         | o. EL        | 970876814 | US    |

| APPLICA                                                    | ATION ELEMENTS                                                              |                                                     | Assistant Commissioner for Patents                                                                                        |  |  |
|------------------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|--|--|
|                                                            | ceming utility patent application cont                                      |                                                     | ADDRESS TO: Box Patent Application                                                                                        |  |  |
| Ego Transmittal 9                                          | cerning utility patent application cont<br>form (e.g., PTO/SB/17)           | ents.                                               | Washington, DC 20231                                                                                                      |  |  |
| المكا . (Submit an original and t                          | a duplicate for fee processing)                                             |                                                     | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)                                                |  |  |
| 2. X Applicant claims:<br>See 37 CFR 1.27                  | small entity status.                                                        | 8. Nucleotide and/or Amino Acid Sequence Submission |                                                                                                                           |  |  |
| 3. X Specification (preferred arrangement)                 | [Total Pages 11 1                                                           |                                                     | (if applicable, all necessary)  a Computer Readable Form (CRF)                                                            |  |  |
| - Descriptive title                                        | of the invention                                                            |                                                     |                                                                                                                           |  |  |
| - Cross Reference                                          | ce to Related Applications parding Fed sponsored R & D                      |                                                     |                                                                                                                           |  |  |
| <ul> <li>Reference to se</li> </ul>                        | equence listing, a table                                                    |                                                     | i. U CD-ROM or CD-R (2 copies); or                                                                                        |  |  |
| or a computer  <br>- Background of                         | program listing appendix                                                    |                                                     | ii paper                                                                                                                  |  |  |
| - Brief Summary                                            | of the Invention                                                            |                                                     | c. Statements verifying identity of above copies                                                                          |  |  |
| - Brief Description - Detailed Description                 | on of the Drawings (if filed)                                               |                                                     | ACCOMPANYING APPLICATION PARTS                                                                                            |  |  |
| - Claim(s)                                                 | •                                                                           |                                                     | 9. Assignment Papers (cover sheet & document(s))                                                                          |  |  |
| - Abstract of the                                          | Disclosure                                                                  |                                                     | 10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney                                                |  |  |
| 4. <b>X</b> Drawing(s) (35 L                               | J.S.C. 113) [Total Sheets 4                                                 | $\exists$ 1                                         | 11. English Translation Document (if applicable)                                                                          |  |  |
| 5. Oath or Declaration                                     | [ Total Pages 2                                                             | 7 1                                                 | 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449                                                         |  |  |
| a. X Newly exec                                            | uted (original or copy)                                                     | _                                                   | 13. Preliminary Amendment                                                                                                 |  |  |
| Copy from a                                                | a prior application (37 CFR 1.63 (d)) ation/divisional with Box 18 complete | d)                                                  | Return Receipt Postcard (MPEP 503)  (Should be specifically itemized)                                                     |  |  |
| i. DELET                                                   | ION OF INVENTOR(S)                                                          |                                                     | 15. Certified Copy of Priority Document(s) (if foreign priority is claimed)                                               |  |  |
| named in t                                                 | atement attached deleting inventor(s) the prior application, see 37 CFR     |                                                     | 16. Nonpublication Request under 35 U.S.C. 122                                                                            |  |  |
| 1.63(d)(2)                                                 | and 1.33(b).                                                                |                                                     | (b)(2)(B)(i). Applicant must attach form PTO/SB/3.                                                                        |  |  |
| 6. Application Data                                        | Sheet. See 37 CFR 1.76                                                      |                                                     | or its equivalent.                                                                                                        |  |  |
|                                                            | <u> </u>                                                                    | <del> </del>                                        |                                                                                                                           |  |  |
| or in an Application Data She                              | CATION, спеск арргорпаte box, and<br>set under 37 CFR 1.76:                 | d supply t                                          | he requisite information below and in a preliminary amendmen                                                              |  |  |
| Continuation                                               | Divisional Continuation-in-part                                             | (CIP)                                               | of prior application No.:                                                                                                 |  |  |
| Prior application information:                             | Examiner                                                                    | -                                                   | Group Art Unit:                                                                                                           |  |  |
| For CONTINUATION OR DIVISI Box 5b, is considered a part of | ONAL APPS only: The entire disclosur                                        | of the pr                                           | ior application, from which an oath or declaration is supplied und                                                        |  |  |
| The incorporation can only be                              | relied upon when a portion has been in                                      | ontinuatio<br>advertent                             | on or divisional application and is hereby incorporated by reference<br>ity omitted from the submitted application parts. |  |  |
|                                                            | 19. CORRESP                                                                 |                                                     |                                                                                                                           |  |  |
| Customer Number or 8ar Co                                  | ode Label 36672                                                             | act or you                                          | of Correspondence address below                                                                                           |  |  |
| Name ·                                                     | CHARLES E. BAXLEY,                                                          | ESOUTE                                              | RE                                                                                                                        |  |  |
|                                                            |                                                                             |                                                     | <u> </u>                                                                                                                  |  |  |
| Address                                                    | 90 John Street, Thi                                                         | rd Flo                                              | por                                                                                                                       |  |  |
| City                                                       | New York                                                                    |                                                     | ate New York Zip Code 10038                                                                                               |  |  |
| Country                                                    | U.S.A.                                                                      | Telepho                                             |                                                                                                                           |  |  |
| Name (Print/Type)                                          | CHARLES E. BAXLEY                                                           |                                                     | Registration No. (Attorney/Agent) 20,149                                                                                  |  |  |
| Signature                                                  | black Burky                                                                 |                                                     | 7 7 20,27                                                                                                                 |  |  |
| urden Hour Statement: This form                            |                                                                             |                                                     | Date 10/23/03                                                                                                             |  |  |

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Effective 10/01/2003. Patent fees are subject to annual revision.

X Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

385.00

| Complete if Known    |                         |  |  |  |
|----------------------|-------------------------|--|--|--|
| Application Numb r   | Not Yet Allotted        |  |  |  |
| Filing Date          | Simultaneously herewith |  |  |  |
| First Named Inv ntor | Jerry CHEN              |  |  |  |
| Examiner Name        | Not Yet Designated      |  |  |  |
| Art Unit             | Not Yet Designated      |  |  |  |
| Attorney Docket No.  | 14001 B                 |  |  |  |

| METHOD OF PAYMENT (check all that apply)                                                                             | FEE CALCULATION (continued) |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
|----------------------------------------------------------------------------------------------------------------------|-----------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|
| Check Credit card Money Other None                                                                                   | tone 3. ADDITIONAL FEES     |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
| Deposit Account:                                                                                                     | Large Entity   Small Entity |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
| Deposit<br>Account 02-1435                                                                                           | Fee Fee<br>Code (\$)        | Fee Fee<br>Code (\$) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Fee Paid      |
| Number                                                                                                               | 1051 130                    | 2051                 | 65 Surcharge - late filing fee or oath                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |
| Oberosit Account Name Charles E. Baxley                                                                              | 1052 50                     | 2052                 | 25 Surcharge - late provisional filing fee or<br>cover sheet                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               |
| The Director is authorized to: (check all that apply)                                                                | 1053 130                    | 1053 13              | 30 Non-English specification                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>——</b>     |
| Charge fee(s) indicated below Credit any overpayments                                                                | 1812 2,520                  | 1812 2,52            | 20 For filing a request for ex parte reexamination                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |               |
| Charge any additional fee(s) or any underpayment of fee(s)                                                           | 1804 920                    | 1804 92              | 20* Requesting publication of SIR prior to<br>Examiner action                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |               |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.                    | 1805 1,840                  | 1805 1,84            | 40° Requesting publication of SIR after<br>Examiner action                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| FEE CALCULATION                                                                                                      | 1251 110                    | 2251 5               | 55 Extension for reply within first month                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |
| 1. BASIC FILING FEE                                                                                                  | 1252 420                    | 2252 2               | 10 Extension for reply within second month                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| Large Entity Small Entity                                                                                            | 1253 950                    | 2253 4               | 75 Extension for reply within third month                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |
| Fee Fee Fee Fee Description Fee Paid Code (\$) Code' (\$)                                                            | 1254 1,480                  | 2254 74              | 40 Extension for reply within fourth month                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| 1001 770 2001 385 Utility filing for                                                                                 | 1255 2,010                  | 2255 1.0             | 005 Extension for reply within fifth month                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| 1002 340 2002 170 Design filing fee                                                                                  | 1401 330                    |                      | 165 Notice of Appeal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |               |
| 1003 530 2003 265 Plant filing fee                                                                                   | 1402 330                    |                      | 165 Filing a brief in support of an appeal                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| 1004 770 2004 385 Reissue filing fee                                                                                 | 1403 290                    | 1                    | 45 Request for oral hearing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |               |
| 1005 160 2005 80 Provisional filing fee                                                                              | 1451 1,510                  |                      | i10 Petition to institute a public use proceeding                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |
|                                                                                                                      | 1452 110                    |                      | , , , , , , , , , , , , , , , , , , , ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |               |
| 335.00                                                                                                               |                             |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE                                                                          |                             |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
| Fee from Extra Claims below Fee Paid                                                                                 | 1501 1,330<br>1502 480      | 1                    | 65 Utility issue fee (or reissue)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <del></del> - |
| Total Claims $7 - 20^{-1} = 0 \times 0 = 0$                                                                          | 1503 640                    |                      | 40 Design issue fee<br>20 Plant issue fee                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |               |
| Independent Claims - 3** = 0 x 0 = 0                                                                                 | 1460 130                    |                      | 30 Petitions to the Commissioner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |               |
| Multiple Dependent 0 = 0                                                                                             | 1807 50                     |                      | The state of the s |               |
| Large Entity   Small Entity                                                                                          |                             | ł                    | 50 Processing fee under 37 CFR 1.17(q)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |
| Fee Fee Fee Fee Description                                                                                          | 1806 180                    |                      | 80 Submission of Information Disclosure Stmt                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |               |
| Code (\$)   Code (\$)   1202 18   2202 9 Claims in excess of 20                                                      | 8021 40                     | 1                    | Recording each patent assignment per property (times number of properties)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| 1201 86 2201 43 Independent claims in excess of 3                                                                    | 1809 770                    | 2809 3               | 85 Filing a submission after final rejection (37 CFR 1.129(a))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |               |
| 1203 290 2203 145 Multiple dependent claim, if not paid                                                              | 1810 770                    | 2810 3               | 85 For each additional invention to be                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |               |
| 1204 86 2204 43 ** Reissue independent claims                                                                        |                             |                      | examined (37 CFR 1.129(b))                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| over original patent                                                                                                 | 1801 770                    | 2801 3               | 85 Request for Continued Examination (RCE)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |               |
| 1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent                                            | 1802 900                    | 1802 9               | 00 Request for expedited examination<br>of a design application                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
| SUBTOTAL (2) (\$) 0                                                                                                  | Other fee (sp               | ecify)               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
| **or number previously paid, if greater: For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) |                             |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
| SUBMITTED BY (Complete (if applicable))                                                                              |                             |                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |               |
| Name (Print/Fine) CHAPLES E DAYLEY FOR USE                                                                           | Registro                    | tion No              | (                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |               |

CHARLES E. BAXLEY, ESQUIRE Telephone 212-791-7200 20,149 (Attorney/Agent) Barly Signature 10/23/03 Date

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.